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## TRANSMITTAL FORM

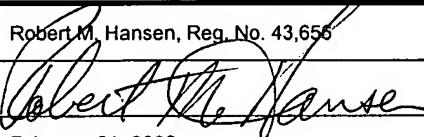
(to be used for all correspondence after initial filing)

Confirmation No.	1851	Application Number <b>10/626,766</b>
Filing Date	July 25, 2003	
Inventor	Myeong Ju KWON et al.	
Art Unit.	2816	
Examiner Name	Terry D. Cunningham	
Attorney Docket No.	40296-0002	

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s), please identify below: <div style="margin-left: 20px;">Request for Continued Examination</div>
<b>Remarks</b>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Robert M. Hansen, Reg. No. 43,656	
Signature		
Date	February 21, 2006	Customer No. 26633

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name			
Signature		Date	

This collection of information is required by 37 C.F.R. 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions by reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

*If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.*

# COMBINED FEE TRANSMITTAL for FY 2005

*Effective 12/08/2004. Patent fees are subject to annual revision.*

PTO/SB/17 (12-04) (Revised) (For payment of 37 CFR 1.17 fees including (f), (g), (h), & (i))

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 910.00)

*Complete if Known*

Application Number	10/626,766
Filing Date	July 25, 2003
First Named Inventor	Myeong Ju Kwon
Examiner Name	Terry Cunningham
Art Unit	2816
Attorney Docket No.	40296-0002

FEB 21 2006



## METHOD OF PAYMENT (check one)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
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Deposit Account Number: 08-1641

Deposit Account Name: Heller Ehrman LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below
- Credit any overpayments and charge any deficiencies
- Charge any additional fee(s) during the pendency of this application
- Charge fee(s) indicated below, except for the filing fee to the deposit account

## FEE CALCULATION (continued)

<b>4. PETITION FEES UNDER 37 CFR 1.17 (f)</b> Fee Code: 1462 Fee \$ 400 For petitions filed under: § 1.53(e); § 1.57(a); § 1.182; § 1.183; § 1.378(e); § 1.741(b)	<b>Fee Paid</b>
<b>5. PETITION FEES UNDER 37 CFR 1.17 (g)</b> Fee Code: 1463 Fee \$ 200 For petitions filed under: § 1.12; § 1.14; § 1.47; § 1.59; § 1.103(a); § 1.136(b); § 1.295; § 1.296; § 1.377; § 1.550(c); § 1.956; § 5.12; § 5.15; § 5.25	<b>Fee Paid</b>
<b>6. PETITION FEES UNDER 37 CFR 1.17 (h)</b> Fee Code: 1464 Fee \$ 130 For petitions filed under: § 1.19(g); § 1.84; § 1.91; § 1.102(d); § 1.138(e); § 1.313; § 1.314	<b>Fee Paid</b>
<b>7. PROCESSING FEES UNDER 37 CFR 1.17 (i)</b> Fee Code: 1808 (1803 for § 1.221) Fee \$ 130 For petitions filed under: § 1.28(c)(3); § 1.41; § 1.48; § 1.52(d); § 1.53(b)(3); § 1.55; § 1.99(e); § 1.103(b); § 1.103(c); § 1.103(d); § 1.217; § 1.221; § 1.291(c)(5); § 1.497(d); § 3.81	<b>Fee Paid</b>

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES			Entity Fee (\$)	Entity Fee (\$)	Fee Description	Fee Paid
Applicati on Type	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	130	65	Surcharge - late filing fee or oath	
Utility	300	150	500	250	200	100		50	25	Surcharge - late provisional filing fee or cover sheet	
Design	200	100	100	50	135	65		130	130	Non-English specification	
Plant	200	100	300	150	160	80		2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
Reissue	300	150	500	250	600	300		920*	920*	Requesting publication of SIR prior to Examiner action	
Provisional	200	100	0	0	0	0		1,840*	1,840*	Requesting publication of SIR after Examiner action	
	<b>SUBTOTAL (1)</b>		\$					120	60	Extension for reply within first month	
								450	225	Extension for reply within second month	
								1,020	510	Extension for reply within third month	
								1,590	795	Extension for reply within fourth month	
								2,160	1,080	Extension for reply within fifth month	

### 2. EXTRA CLAIM FEES

Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
50	25	Each claim in excess of 20 or, for Reissues, each claim in excess of 20 and more than in the original patent
200	100	Each Independent claim in excess of 3 or, for Reissues, each independent claim more than in the original patent
360	180	Multiple dependent claim, if not already paid

Extra Claims      Fee from above      Fee Paid

Total Claims	-20** =	x	=	
Independent Claims	-3** =	x	=	

\*\*or number previously paid, if greater; For Reissues see below

Multiple Dependent		=	

**SUBTOTAL (2)** \$

3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof (round up to the a whole number). See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)				
Total Sheets	Extra Sheets	Number of each additional 50	Fee (\$)	Small Entity Fee (\$)

-100 =	/50 =	x 250	OR	x 125	<b>SUBTOTAL (4+5+6+7+8)</b>	\$ 910
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\* Reduced by Basic Filing Fee Paid

**SUBMITTED BY** *[Signature]* **Complete (if applicable)**

Name (Print/Type)	Robert M. Hansen	Registration No. (Attorney/Agent)	43,656	Telephone	202-912-2000
Signature	<i>Robert M. Hansen</i>	Date	February 21, 2006	Customer No.	26633